FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
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Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     CONNORS JOHN J					2. Issuer Name and Ticker or Trading Symbol ICU MEDICAL INC/DE [ ICUI ]										k all app	ip of Reporting Person(s) to I olicable) ctor 10% O			
(Last)	,	,	Middle)		3. Date of Earliest Transaction (Month/Day/Ye $04/20/2011$						)ay/Yea	ar)			Offic belo	eer (give title w)		Other (specify below)	
951 CALLE AMANECER				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)													X		Form filed by One Reporting Person				
SAN CLEME	NTE C	A 9	92673											Form Pers	n filed by More than One Reporting son				
(City)	(Si	tate) (	Zip)																
		Tab	le I - Non-Deri	vative S	Sec	uritie	s A	cquired	, D	ispo	osed	of, or E	Benefic	cially	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					Execution Date,				e, Transaction Dispos Code (Instr. and 5)			urities Ac sed Of (D)		3, 4 Secu Bene Owne		icially d	Forn (D) o Indir	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
								Code		v	Amoui	nt (A) or (D)		rice	Repor			r. 4)	(Instr. 4)
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (In 8)	nsaction e (Instr.				6. Date Exercisabl Expiration Date (Month/Day/Year)			e and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3		of Der Sed (In:	Price rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership
				Code	v	(A)	(D)	Date Exercisa	ole	Expi Date	ration	Title	Amour or Number of Shares	er					
Non- Qualified Stock Option (right to buy)	\$44.82	04/20/2011	04/20/2011	A		1,500		04/20/20	12	04/20	0/2021	Common Stock	1,500	0 \$	<b>3</b> 44.82	1,500		D	

Explanation of Responses:

By: Lynn DeMartini For: John J. Connors

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).